

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

10696043

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/	/				
2						
3		/				
4		/				
5		Ⓟ				
6		Ⓟ				
7		Ⓟ				
8		/				
9		Ⓟ				
10		Ⓟ				
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13		Ⓟ				
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50						
TOTAL IND.	2					
TOTAL DEP.	30					
TOTAL CLAIMS	32					

	IND	DEP	IND	DEP	IND	DEP
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